AFRICA BUREAU
Office of Sustainable Development

Mid-Term Evaluation
SO20
Family Planning and Reproductive Health

March 26, 2001

Submitted by: SO 20 Team

Core Team:
Khadijat L. Mojidi, Team Leader &
Senior Reproductive Health Technical Advisor
Zeline Pritchard, FGC Technical Advisor
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Extended Core Team:
Rhonda Smith, Communication Specialist, SARA Project
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Antonia Wolf, Documentation Specialist, SARA Project

SO20 FP/RH
MID-TERM EVALUATION
March 24, 2001

Question 1: Do critical assumptions and development hypothesis underlying the results framework still hold true?

Yes, our critical assumptions for promoting policies and strategies for increasing sustained, quality family planning services in the region remain valid. In fact, over the past few years SO interventions were broaden to reflect both family planning and other critical reproductive health activities including STIs management and HIV/AIDS prevention activities.

Our hypothesis remain valid because, sub-Saharan Africa continues to have the some of the highest rates of population growth (2.5%) coupled with some of the poorest health and socio-economic statistics in the world. With the exception of a few countries (Kenya, Zimbabwe and S. Africa), high fertility and low contraceptive use continues to be one of the most importance challenges facing Africa governments. Availability of quality family planning and reproductive services including services to control the spread of STI/HIV/AIDS is still out of the reach of millions of men and women in Africa. Although 20% of women now use modern contraception in Africa, millions more who want no children currently do not use family planning. Consequently, African women continue to suffer some of the highest rates of maternal death and mortality due unwanted or ill-timed pregnancies, pregnancy-related complications, and unsafe abortion. HIV/AIDS is spreading the fastest among young women under 25 years of age, compounding high rates of disease and poor health among women of reproductive age.

Our assumption of making family planning more widely accessible is even more critical in light of the HIV/AIDS epidemic in Africa. Given that unprotected sex makes puts people at risk for both unwanted pregnancy and infection, access to modern contraceptive methods, especially condoms is essential. Fueling the exchange of sex for money is growing poverty, poor economic performance and continued low status of women. While the SO critical assumptions and hypothesis remains valid, the SO statement has been refined to adequately reflect the selected reproductive health interventions that continue to be a part of the portfolio. Linkages with other SO programs that improve economic women's status and participation in civil society need to be strengthened and funded. SO 20 still assumes the Agency remains committed to stabilizing the world's population growth and continues to ensure adequate funding for its international population program.

Question 2: Are larger non-UAID circumstances beyond the SO control and influence (besides those identified in the critical assumptions) having an effect on the program?

Yes. On January 22, 2001, President Bush re-imposed the Global Gag Rule on the USAID population program. This policy restricts all foreign NGOs that receive USAID family planning funds from using their own, non-U.S. funds to provide legal abortion services, lobby their own governments for abortion law reform, or even provide accurate medical counseling or referrals regarding abortion. The 1973 Helms Amendment already restricts U.S. funds from being used for these activities. The most serious effect of this policy is that organizations that are well suited to provide comprehensive reproductive health care services will lose their funding or be frozen out of

seeking U.S. aid. For example, the International Planned Parenthood Federation (IPPF), the largest umbrella organization receiving USAID funding, will lose eligibility for about $8 million. The funding cuts will reduce support to programs throughout sub-Saharan Africa that increase women's access to pregnancy-related care, family planning, and services for HIV/AIDS and other sexually transmitted infections. Cuts in family planning funding mean higher rates of unintended pregnancy and higher rates of abortion.

Evidence of the Gag Rules' impact is starting to surface. Ingar Brueggemann, Director-General of IPF, said that a variety of RH programs would be affected. These include "sharing information about sexually transmitted diseases and family planning for young people in Ghana." The Planned Parenthood Association of South Africa states that the cuts may threaten the existence of its sex education programs. PPASA stands to lose about $650,000 (25% of its annual budget) in direct and indirect funding. Motsomi Aubrey Senne, Chief Executive of PPASA, said that the budget cuts represent an end to his dreams of providing sex education to one million South African youths. At a single centre in Orange Farm, 1,500 young people visit each month to obtain free condoms, speak with sex education counselors, take pregnancy tests, and learn about AIDS.

While SO20's results package focuses on improving policies and strategies for expanded family planning and other RH services, new policies and strategies will have limited impact if basic support and funding for reproductive health services is reduced. This policy is likely to seriously impact USAID's ability to maintain a leadership position in international population programs, signaling to the global community a declining USG commitment to African family planning and reproductive health programs.

Question 3: Have our roles and relations vis-a-vis other USAID Offices and Bureaus, missions, and partners (NGOs and Donors) changed? More importantly, are they functioning, as they should?

SO20 roles and relationships with others are evolving and efforts to be more responsive have been put into place. Our relationships with other USAID offices, Bureaus, contractors and Africa partners have deepened. SO 20's work with missions and donors needs more attention and focus.

- **Within Africa Bureau**. Over the past 2 years, SO20 has stepped up its participation in: participating in interoffice working groups with DG for linkages with family planning and DP for country strategy development. In addition, the team leaders has worked over the past two years to actively engage the WA desk officers in technical briefings and meetings on their countries and in preparing for R4 reviews and presentations. Finally, the SO has been responsive in answering Front Office requests, preparing briefings for the hill, developing inputs into briefing notebooks for CODELs, and responding to CN queries. However, better guidance is required to understand exactly what is needed, turn around time and if critical format and page length for specific tasks. A system or protocol for responding to Front Office requests is critical to ensure that the task is done in an efficient and timely manner.

- **Missions**. Like AFR/SD, SO20 has to do a better job in explaining and informing mission son AFR/SD supported activities and programs. In the recent SO20 portfolio assessment, most

missions surveyed indicated the need to increase communications to the field on AFR/SD-initiated activities and programs, i.e. the SARA Project. However, at the same time, missions want to keep the communications "short and sweet". Good suggestions were made from the field on how to make more use of the web, establish mechanisms for regularly scheduled phone calls, and other "mission friendly" ways to enhance communication and share AFR/SD supported technical tool and products. Given that most of our OYB transfers are through Global Contractors, it is critical that the field is frequently consulted and briefed to ensure that work brings "value added" to mission's own program. Building on AFR/SD staff retreat, SO20 will utilize new, field friendly mechanisms to support mission programs. This will include expanding the use of periodic phone calls and conference calls among SO team members, consistently briefing and debriefing missions during SO team members TDY visits and ensuring that SO members participate in meetings when mission staff are in Washington.

- **Other Bureaus**. SO20 continues to build on solid relationships with staff of the Global Bureau-Population, Health & Nutrition (PHN) center on two levels. First of all SO20 continues to rely on G/PHN cooperating agencies and contractors to assist in analyzing and identifying emerging trends in reproductive health. This keeps us current and able to serve as a catalyst for keeping Africa -focused issues on the agenda. These CAs are critical partners identifying and pursuing research on cutting edge issues on family planning and reproductive health. SO20 has intensified work over the past two years to strengthen documentation and dissemination of better practices emerging from AFR/SD funded activities. This is resulting in region specific tools and technical products for leveraging mission and donor funding in order to o replicate and scale up interventions at the country level.

  Secondly, SO20 continues to be actively involved in G/PHN working groups to ensure that African issues are kept on the agenda. SO 20 leadership has been critical in initiating work on Post Abortion Care, Adolescents Reproductive, Female Genital Cutting and Contraceptive Security. SO 20 guidance and support is resulting in greater influence and directing emerging issues in family planning and reproductive health in the Agency. For example, after 4 years on intense lobbying and technical inputs, SO20 contributed greatly to final approval of the USAID policy on FGC last year. However, while there are substantial technical benefits in close collaboration with G/PHN, AFR/SD is limited in its ability to document, monitor and report OYB transfers. Bureau guidance is requested to identify how AFR/SD might better hold Global contractors accountable for results arising from AFR/SD funded activities.

- **African Partners and NGOs**. S020 work with African partners and NGOs continues to be central to how we do our work in the region. Through the SARA project, AFR/SD is working to strengthen African capacity and supporting institutional development in key technical areas in reproductive health and family planning. Some of the areas in which SO 20 has forged linked with African partners has included the areas of advocacy, dissemination, networking, coalition building and research. The SO will continue to sub-contract African partners to undertake work in the region for promoting reproductive health and agenda setting on import issues.

- **Donors**. Given limited staff with in SO20, direct contacts with donors working in the field of reproductive health has not been optimal. The SO team acknowledges the need to find ways to

ensure that Africa Bureau is at the table and actively engaged with key reproductive health donors (UNFPA, WHO, World Bank, Gates Foundation). SO20 needs to be able to influence setting the reproductive health agenda, work on joint technical products, and mobilize support on key issues from a common platform with other donors. However, indirectly through our CA partners, SO20 has been able to leverage funds and have AFR/SD supported programs and strategies adopted and replicated with other donor funds. To date, AFR/SD partners have leveraged over $10 million to expand and replicate AFR/SD supported research and models.

- **MSI/HBCUs.** SO20 has responded to USG's mandate for all Federal Agencies to expand outreach to Minority Serving Institutions/Historically Black Colleges and Universities (MSI/HBCUs). Currently, the SO team leader has a member of the MSI Interagency Working Group, and provided technical backstopping for new initiatives with Africare, Howard and Morehouse Universities. The team plans a new activity to work with a HBCU consortium (Minority Health Professional Foundation) to help build capacity of HBCUs in international reproductive health issues and assist the team in supporting mission programs, where appropriate.

Question 4: Are we meeting our management contract in terms of projected results and targets? Yes, FP/RH SO Team continues to exceed its targets in most activities. Despite instability in population funding, SO implementing partners have been able to successfully leverage other USAID funds from missions, multilaterals and private foundations. This has enabled AFR/SD to achieve and exceed targets in most of its planned activities. See SO20 R4 2000 submission.

Question 5: What is the status of our Program Monitoring Plan (PMP) and associated program evaluation? In 1998 SO work on the PMP was initiated and extensive revisions have been done over past 1 year. Efforts focused on rewriting and updating results packages, developing indicators and refining with more precision indicator definitions and units of measure. In preparation for the mid term review, the SO team commissioned an independent consultant to review its portfolio in September 2000. The purpose of the review was to assess current progress of SO activities identify gaps and recommend emerging reproductive health issues. Findings of the assessment affirmed that the current mix of family planning and reproductive activities remain valid and respond to the needs of the sector. The review also recommended: broadening of dissemination channels for new SO tools and lessons learned to increase AFR/SD visibility; ii) supporting innovative pilot projects with potential for replication throughout the region; iii) continuing to leverage funds; and maintain focus on capacity building of African networks and institutions—a unique niche for AFR/SD.

Question 6: If current funding trends (also known as inputs) continue (i.e. the seemingly inexorable decline in D/G and EG funds, the anticipated increases in CAFR/SD and HIV/AIDS funds), what will the impact be on our ability to deliver as promised?

Since 1996 population funding continues to be unstable due to domestic U.S. policy and bi-partisan politics. This has resulted in SO20 funding levels being unpredictable and vulnerable. Over the past eight years SO20 population funding levels have dropped from a high of $3.2 million in 1994 to $950,000 in 1999 and now holding around $2 million at present. The reintroduction of the Mexico City Policy in, 2001 comes with uncertainty in SO20 programming and future work. As a result, the

SO has have to make tough decisions between continuing analytical work on emerging reproductive health issues versus activities which pilot new strategies and approaches for improving family planning and reproductive health in the region. These are difficult decisions which are likely to negatively impact on the ability of AFR/SD to influence dialogue and help shape critical reproductive health issues emerging in the region. For example, research on family planning financing and sustainability in Africa and the Regional Logistics Initiative were started a few years ago. Both activities have been seriously under funded. Although theses are issues critical to Africa, few other international agencies are providing adequate attention or investments. Stagnant and declining SO20 budgets are likely to further curtail work in these critical areas and prevent the SO from addressing emerging issues for the remainder of the Strategic Plan Period.

Question 7: Do we have the number and types of staff required to fulfill our mission/contract? Are there pending issues regarding staffing?

No. SO20 has been understaffed for the past several years--down currently to a 1-person core team. This seriously compromises our ability to meet our contract and ensure adequate coverage requiring Bureau representation in meeting on population and family planning issues. Although, SO 20 should have at least 2 full time technical staff, the second slot has been vacant since February 2000. Prior to that, the previous SO team leader worked alone for most of 1998. Although a second Reproductive Health Advisor was recruited and hired in November 1999, pressures from the HIV/AIDS team (SO21) limited her contribution to co-managing SO20 activities. Replacement of a second technical full time advisor is pending. In addition, the part time FGC Advisor is jointly funded and shared with G/PHN and has been given a more active role in on the team. In January 2001, a program support staff was hired to provide administrative support to SO 20 and selected assistance to SO19. However, while the SO team leader sits at RRB, the program staff whose clearance is still pending, sits at G Street. Access to support staff at RRB is limited. Therefore SO team leader time is spent clearing visitors, reserving meeting rooms, and procuring AV equipment for technical presentations, which is an inefficient use of technical staff time. Perhaps, clearer guidance is required to review roles and responsibilities of all support staff to ensure AFR/SD maximizes use of their time. As a result of continuing staffing difficulties, SO20 relies heavily on its expanded core team of professionals and a host of Global CA partners. The other extended SO Core team comprises 3 professionals through the Support for African Research and Analysis (SARA). Extended Core Team members include: a Reproductive Health Specialist, a Documentation Specialist and a Research/Communication Specialist. Finally, in 2000, SO 20 initiated a successful mentoring activity with the University of Michigan Graduate HBCU program. This has resulted in SO20 fielding a HBCU intern for six months to work on specific SO activities. The intern has been subsequently assigned to a field program in South Africa. Although the team would like to replace the intern, office space limits its ability to do so. See Figure 1: SO 20 staffing chart and roles and responsibilities.

Question 8: DO AFR/SD SO teams (and within teams, team members) have clearly delineated roles and responsibilities and adequate authority to implement activities?

Since 1996, the SO20 portfolio has benefited from maintaining an active; core working group comprised of six members of AFR/SD and Sara Project staff. Most recently, the team has grown to

include a representative of the Global Bureau's Research Office who specializes in FGC and gender issues. The group meets regularly, twice a month or more depending on needs, always has an agenda and follows-up from one meeting to the next on any outstanding tasks. SARA Project members help the AFR/SD staff identify emerging needs, implement and monitor field activities, document results and impacts, and package and disseminate materials using multiple formats and channels. Team member roles are well defined according to their positions within the Bureau and the SARA Project, and special tasks, such as USAID documentation and reporting assignments, are frequently divided among group members. One area that has posed a challenge is how to more clearly determine roles and responsibilities among cross-sectoral activities. SO20 continues to support activities that complement the SO19 and SO21 results packages. Examples include SO20's role in the design and implementation of the post-abortion care (PAC) initiative and supporting studies on the integration of HIV/AIDS services into family planning and other service programs. In general, these efforts have served to further the goals and results of the respective portfolios. At times, however, responsibilities and lines of authority are not clear. One solution might be to invite a representative of the SO19 and SO21 teams to participate in the SO20 core working group meetings. They could either become permanent members, or just participate in periodic planning meetings as necessary. Roles, responsibilities, and who has final authority should also be clearly defined at the outset of each individual crosscutting activity.

Question 9: Are we vulnerable in terms of: a) Audit Readiness; b) legal and legislative restrictions; and c) financial management?

One of the advantages of OYB transfers through Global USAID contractors is that financial vulnerability is reduced since these organizations must met USAID standard provision and reporting requirements, including financial management. However, AFR/SD has difficulties documenting agreed SOWs, requesting reports from Global partners, and ensuring proper credit is given to AFR/SD supported publications due to contractual constraints. . In the last two years, SO 20 has addressed this by requesting that each CA partner provide a detailed SOW including a provision for copies of their reports through the CTO. Although time consuming, establishing a solid working relationship with Global PHN CTOs and CA partners, decreases SO20's financial vulnerability by periodic consultations and meetings to monitor progress. Specifically, in connection with R4 season, the team requests a summary of results of AFR/SD supported activities as well as pipeline funding. This is used by the team to make decisions for subsequent funding allocations based on progress towards results and remaining pipeline.

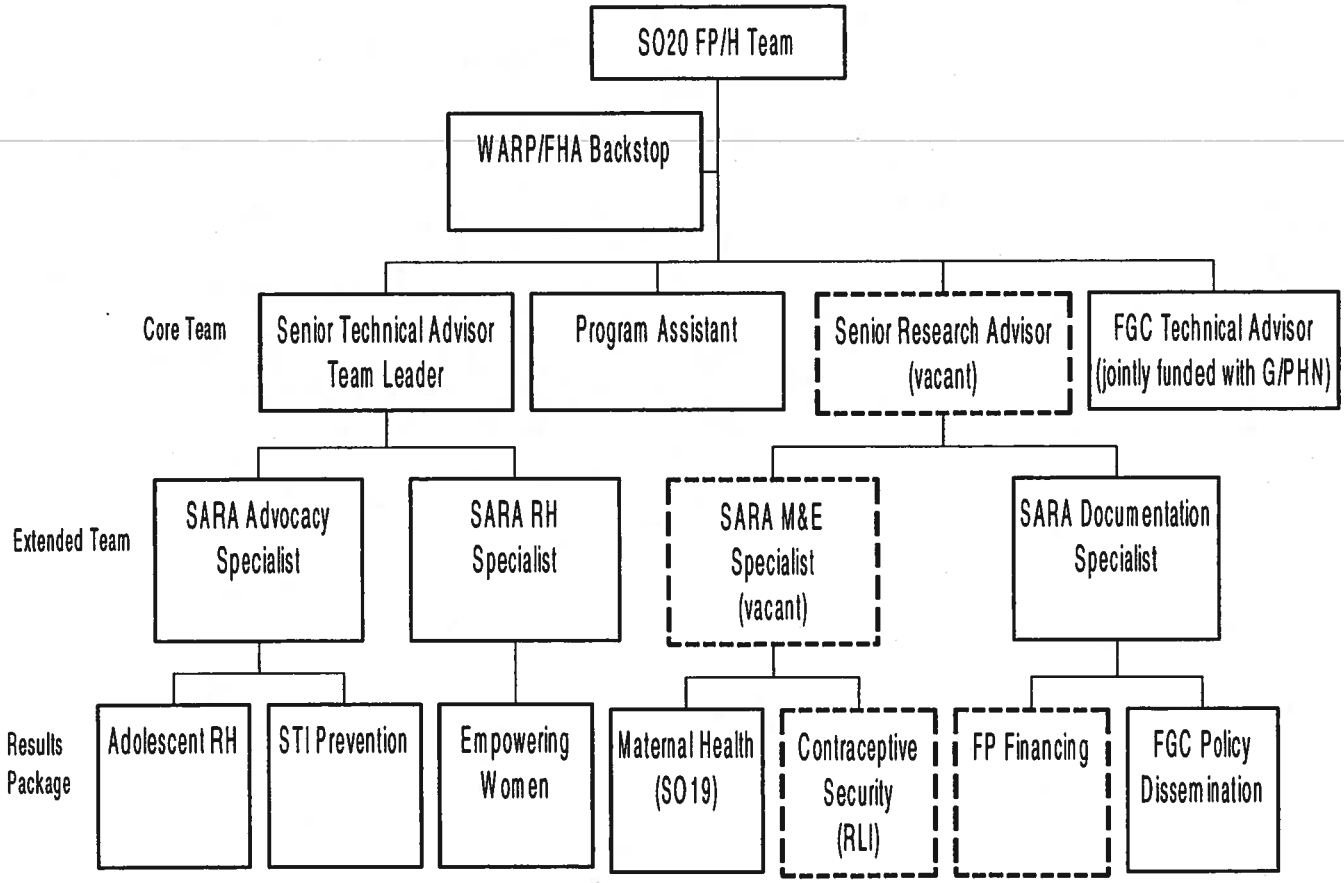
Question 10: Is there anything that we should be doing more or less of? Is there anything that we are doing that we should not be doing? Is there anything that we should be doing that we are not doing?

Given the impact of domestic public policy on population funding, SO20 needs to be more strategic and proactive in working with its partners to increase domestic advocacy and education. For example, AFR/SD partners regularly are invited to participate in seminars and symposia with congressional staffers to discuss USAID supported population programs. Three major briefings were held on the hill with AFR/SD CA and African partners. A major event with former President Clinton urging USG to stay the course in ensuring population funding because as the Nigeria partner

told Congress that "family planning saves women's lives and promotes her participation in national development". The second event was organized to brief members of Congress on the status of FGC programs and highlight challenges that FGC poses in Ghana. On March 8th, International Women's Day, a bipartisan group of congressmen had several AFR/SD partners to highlight lessons learned in promoting family planning and HIV/AIDS programs. AFR/SD partners from Uganda and Zimbabwe gave impressive presentations to share how reproductive program are being integrated and changing high risk behavior in those countries.

SO20 needs to work more with key congressional staffers to organize strategic events for educating the hill on the impact USAID programs are making in Africa and to highlight the resulting risks of declining population funding. In addition, several of AFR/SD's influential partners (Johns Hopkins University) has offered to organize several briefings and media events (interviews with NPR radio) to education the new administration on USAID population programs. SD should consider working with LPA and Global/PHN to establish a mechanism for quarterly briefings and events that would enlighten and education members of congress on USAID and in particular Bureau supported programs.

FIGURE 1: SO 20 STAFFING CHART AND DIAGRAM OF ROLES AND RESPONSIBILITIES (March , 2001)



SO Team Members involved in the following working groups

- -Adolescent
- -PHN Visioning
- -PAC
- -MSI/HBCU
- -Gender/Male involvment
- -FGC

SO 20 FAMILY PLANNING/REPRODUCTIVE HEALTH PORTFOLIO REVIEW

AFRICA BUREAU
OFFICE OF SUSTAINABLE DEVELOPMENT
MARCH 2001

SO20 PORTFOLIO REVIEW/ASSESMENT

- SUSAN ADAMCHAK'S SCOPE OF WORK
- COVER PAGE AND EXECUTIVE SUMMARY OF REPORT
- POWER POINT PRESENTATION

SO 20 Portfolio Review

Conducted for

United States Agency for International Development
Bureau for Africa
Office for Sustainable Development

Prepared by

Susan E. Adamchak, Ph.D.
March 2001

SO 20 FP/RH PORTFOLIO REVIEW

I. Background

In 1993 and 1994, AFR/SD and SARA conducted an extensive issues identification process (literature review, audience needs survey, expert working group meeting) and developed two strategic frameworks: Safe Motherhood and Reproductive Health in Africa, and Population and Family Planning in Africa. In 1997, AFR/SD developed and adopted Strategic Objective 8 (Adoption of Policies and Strategies for Increased Sustainability and Quality of Family Planning Services), which included six focus areas with individual workplans and results packages.

Although SO20 has undergone multiple reviews and extensive revisions over the last several years, there has not been a comprehensive assessment of issues and program directions since the earlier issues identification process. There has been a major shift in approach to family planning and other reproductive health services since the International Conference on Population and Development in Cairo. It has now become standard practice to view RH in a larger, more integrated context than had been the case previously. Moreover, the SO20 team can now benefit from the lessons learned over the course of the 1992-1999 HHRAA Project activities. Therefore, the SO20 team proposes a portfolio review to assess the relevance of its focus activities within the current context.

II. Overall Purpose of the Review

The overall purpose of the review is to assess the relevance of activities within AFR/SD's Reproductive Health strategic objective and to suggest possible changes to plans.

A. Objectives

The specific objectives of the review include:

1) to review the influence the SO 20 portfolio of activities has had on policies and programs;

2) to determine whether the SO 20 activities reflect current priority issues and approaches to reproductive health programs in Africa (in terms of addressing important needs and reflecting the state of the art in technical areas); and

3) to recommend any adjustments to the current mix of activities and funding allocations for AFR/SD to SO 20, given SD's comparative advantage and existing resources, as well as what CAs, other donors, and host country governments are doing in reproductive health. (Note that this may or may not involve recommending revisions to SO 20 results packages/activities and as to whether the portfolio should be more focused, depending on the findings.).

B. Scope of Work

Working closely with the members of the SO20 Core Group, the Consultant will:

1) Review existing AFR/SD results packages, R4 documents, impact review sheets, evaluations and other technical documents describing the framework within which the core group works and/or which describe results achieved (going back to 1993)

2) Meet with members of the SO20 core team as a group and individually (as required) to gather additional information on ongoing activities and their expected results. While emphasis should be placed on SO 8, the consultant should also liaise with members of the SO 21 (HIV/AIDS) and SO 19 (maternal health) core group due to the linkages which exist between the technical areas.

3) Review the strategic objectives, results packages and activities of selected African Missions, REDSO, FHA and the Global Bureau. Following consultations with members of the SO 8 Core Group to identify mechanisms for soliciting Mission input, conduct telephone interviews to assess what influence AFR/SD initiated activities have had on programming decisions at the Mission and country level. In what areas do partners feel they need additional programmatic support? What issues are important to the colleagues interviewed? What are their perceived information gaps? Do they feel the need for support in dissemination and documentation of their work?

4. Meet with selected CAs, NGOs, networks, and African Regional Institutions (to be determined in collaboration with the Core Group) to

a) discuss activities funded through AFR/SD and to assess what outcome these activities have had. Does the CA plan to continue implementing similar activities and with what funding? What other outcomes have resulted (such as policy or practice changes in partner institutions and governments)? According to respondents, would their programs have gone in a different direction without AFR/SD inputs, TA, etc...?

b) discuss the CAs' views on the state of the art/best practices in their program areas.

c) Discss the CAs' views on which models and/or tools they have developed or used which they recommend be used elsewhere.

4) Working with the assistance of a second intern/consultant, review:

- findings made and resolutions presented at major international and African conferences (last three years?) such as the African Population Conferences, African AIDS Conferences, Safe Motherhood meetings, etc...;
- selected RH literature (last three years) and identify major lessons learned/best practices reported in RH.

5) Assess and report on whether AFR/SD's activities reflect the state of the art and whether they are addressing actual gaps (i.e. they are not being addressed elsewhere). Are new findings and approaches being promoted? Have enough

Missions, donors, and other partners adopted and funded programs and policies in certain technical areas to warrant decreased emphasis on those areas by AFR/SD?

6) Participate in planning a meeting of interested partners (to be defined with the SO 20 Core team) and present findings at this meeting to discuss the issues emerging from the review and to make recommendations for future programming directions for SO 20.

C. Deliverables

- Draft report (electronic and 10 hard copies using MS Word) on the findings of the review including interview results, main findings from the literature review (main issues and new developments in the RH field), and recommendations for future programming.
- Revised report based on comments and feedback from the SO 20Core Team presented within ten days of receipt of comments (electronic and 10 hard copies).
- Power point presentation of the main report findings and recommendations (electronic and 10 hard copies).

The consultant will meet regularly with the SO 20 Core Team and will keep its members informed of progress on the work. Draft versions of interview guides and questions for partners and CAs will be shared with the SO 20Core group.

D. LOE: 37 days including planning and participating in the partners' meeting, literature review, interviews, analysis and report writing.

ACTIVITY	LOE (days)
Consult with SO 8 Core group to select Missions and other partners on which to focus, and to discuss SOW.	1
Become familiar with AFR/SD results packages for SO 8 and SO 9.	3
Attend SO 8 Core group meetings and meet with members individually.	3
Meet with SO 9 Core team members.	1
Review the SOs and RPs of the selected Missions and other partners, and review reproductive health literature and conference results.	2
Conduct interviews with Washington-based partners.	7
Conduct telephone interviews and correspond by e-mail with partners in Africa.	10
Analyze findings and write draft report.	5
Prepare draft power point presentation of findings and recommendations.	2
Revise report and presentation on basis of comments received.	2
Present findings at meeting of interested partners.	1
TOTAL	**37**

A PRB population fellow will be assigned to assist the consultant. The fellow will be responsible for conducting the literature review and reviewing conference resolutions and findings

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PROFESSIONAL EXPERIENCE

RESEARCH DESIGN AND DATA ANALYSIS

- Designed and implemented in-depth interviews with 65 policy makers and health professionals
- Designed and implemented survey of 1500 medical aid (insurance) clients
- Analyzed survey and medical record data using statistical, demographic, and cost benefit analyses
- Analyzed demographic and financial impact of family planning program
- Analyzed data on fertility, family planning, and maternal and child health from national surveys
- Projected cost of family planning resources required to achieve national population targets
- Analyzed marketing data from retail audits, "mystery shoppers" and consumer tracking surveys
- Analyzed demographic impact of two community based family planning projects

EVALUATIONS

- Co-author of monitoring and evaluation resource guide for adolescent health programs
- Evaluated global training program for primary care providers (team leader)
- Evaluated private commercial sector, industry-based and NGO FP/MCH program (team leader)
- Evaluated population policy communications project (team leader)
- Evaluated family planning and health project (team leader)
- Evaluated health and health financing bilateral program
- Evaluated African operations research and technical assistance project (team leader, twice)
- Evaluated international health information center (team leader)
- Evaluated worldwide demographic and health survey project
- Prepared evaluation plans for five private sector family planning projects
- Developed interview instrument and evaluated international demographic training programs

ASSESSMENTS

- Conducted case study of adolescent peer counseling program (team leader)
- Conducted institutional analysis of Ministry of Health and Child Welfare
- Conducted population sector assessment

- Assessed post-intervention impact of family planning and AIDS operations research projects
- Studied sustainability of AID country health program and implications for current projects
- Identified data needs of national health reporting system
- Reviewed national population sector activities and constraints and recommended future action

PROJECT PLANNING AND DEVELOPMENT

- Defined potential for private sector participation in family planning, identified interventions
- Coordinated drafting of national family planning strategy
- Prepared project designs, Project Implementation Documents and Project Papers

POLICY DEVELOPMENT

- Authored handbook to assess population and reproductive health policy environment
- Assessed support for state public health reform among policy makers and health professionals
- Conducted legislative review of statutes pertaining to private nursing practices
- Co-authored Ministry of Health report on need for and structure of population policy unit
- Developed USAID regional population policy strategies

EMPLOYMENT HISTORY

1999-present	**President**. Planning and Evaluation Resources, Inc. Manhattan, KS
1999-present	**Adjunct Assistant Professor and Visiting Lecturer**. Tulane University School of Public Health and Tropical Medicine, New Orleans, LA
1996-1997	**Project Consultant**, The Kansas Health Institute, Topeka, KS
1996-present	**Adjunct Assistant Professor**. Department of Sociology, Kansas State University, Manhattan, KS
1995-1997	**Study Coordinator**. Evaluation and Monitoring Specialist, The PROFIT Project, Arlington, VA
1994-present	**Key Consultant**. POPTECH Project, Arlington, VA
1992-1993	**Instructor**. Kansas State University, Manhattan,KS
1987-present	**Demographic Consultant**. Self employed, Manhattan, KS
1984-1987	**Social Science Analyst**. U.S. Bureau of the Census, International Statistical Programs Center, Evaluative Studies Branch, Washington, D.C.
1985-1987	**Social Science Analyst**. Seconded to Office of Population, Policy Division, U.S. Agency for International Development, Washington, D.C.
1983-1984	**Demographer**. The Population Institute, Washington, D.C.

EDUCATION

Ph.D. (1995)	Brown University, Providence, RI Sociology (Population Studies; Modernization and Economic Development).
M.A. (1979)	Bowling Green State University, Bowling Green, OH Sociology (Demography; Social Psychology)
B.A. (1976)	Southern Connecticut State University, New Haven, CT Communication Disorders, Psychology

ADDITIONAL SKILLS

Language:	Speak fluent French; read Spanish.
International:	Worked in 18 African and 7 Asian countries. Residence in Zimbabwe, 1987-1988; Namibia, 1995.

CONSULTING CLIENTS

The Futures Group International
Deloitte Touche Tohmatsu
TvT Associates
Statistica, Inc.
Philippines; Zimbabwe
John Short & Associates, Inc.
Louis Berger, Inc.
University Research Corporation
USAID/Madagascar; Mali;

Westinghouse Applied Systems
John Snow, Inc.
KSU Botanic Garden Society Board
The Annenberg Foundation and Ohio University
International Science and Technology Institute
Kansas Health Institute
Tulane University
Improvement Commission
Japanese Organization for International Cooperation in Family Planning
The Pathfinder Fund
Basic Health Management, Inc.
Procurement Services, Inc.
Devres, Inc.
DUAL, Inc.
Macro International Inc.
Governor's Public Health

PROFESSIONAL MEMBERSHIPS

Population Association of America
Kansas Public Health Association
Association
American Public Health Association
International Sociological

PROFESSIONAL ACTIVITIES

Reviewer: *Demography*; *The Family Planning Manager*; POLICY Project Global Policy Research Program
Member: FOCUS Program Technical Working Group on Research and Evaluation.
Workshop Co-Organizer: "Expanding Private Sector Participation in Family Planning Service Delivery: Building on Strengths." Harare, Zimbabwe, January 1996.
Workshop Co-Organizer: "Expanding Reproductive Health Services: Initiatives for Change." Harare, Zimbabwe, August 1994.
Session Organizer: "Historical Demography in Developing Countries." Annual meeting Population Association of America, Miami, FL. May 1994

LECTURES AND PRESENTATIONS

June 1999. Tulane University School of Public Health and Tropical Medicine. Two-week Graduate Seminar, "Adolescent Health in Developing Countries."
Apr. 1999. Women's Studies Senior Seminar. Kansas State University. "Cairo plus Five: Policy and Program Changes in Reproductive Health."
Feb. 1999. Testimony on "Tracking Health Status in Kansas.", before the Governor's Public Health Improvement Commission.
Nov. 1998. Department of Sociology Proseminar. Kansas State University. "Non-Academic Employment: Skills Development and Opportunities."
Feb. 1998. Women's Studies Senior Seminar. Kansas State University. "From Cairo to Kampala: Translating International Policy into Better Reproductive Health for Women."
Jan. 1998. Friday Focus on Women, Kansas State University. "From Cairo to Kampala: Translating International Policy into Better Reproductive Health for Women."
Mar. 1997. Testimony on "Development of a Public Health Improvement Plan", before the Kansas House Committee on Health and Human Services.

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Mar. 1997. American Association of University Women, Manhattan Chapter. "Public Policy and Private Choices: Reproductive Health."

Feb. 1997. Faculty member for Turning Point Workshop, Wichita, Kansas. "Feasibility of Developing a Public Health Improvement Plan in Kansas."

Nov. 1996. Home Economists in Home and Community, Manhattan, KS. "Women around the World."

Sep. 1996. The Futures Group, Washington, D.C.. "Assessing the Policy Environment: What Influences the Population Policy Process?"

Mar. 1996. Department of Political Science, Kansas State University. Seminar on Developing Nations. "Environmental Factors that Influence Policy Development."

Apr. 1995. Department of Sociology, University of Pretoria, South Africa. Colloquium on "The Demographic Agenda in Southern Africa."

Nov. 1994. American Association of University Women, Manhattan Chapter. "Faces of Women in Africa: Changing Roles in Changing Societies."

Sep. 1994. Department of Geography, University of Zimbabwe. "Population and Family Planning."

Apr. 1993. Department of Political Science, Kansas State University. Seminar on Gender Issues. "The Personal is Political: Policy Barriers to Contraceptive Use."

Apr. 1992. Department of Sociology, Anthropology and Social Work, Kansas State University. "Alternative Means of Health Care Delivery."

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Apr. 1986. Department of Public Health, Tulane University. "Technical Assistance in Developing Countries: The Role of the International Statistical Programs Center."

Apr. 1986. International Statistical Programs Center, U.S. Bureau of the Census. Seminar on Selected Topics in International Development. "Multinational Corporations."

Oct. 1983. Department of Political Science, The George Washington University. "Brazil's Population Problems."

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COMMUNITY SERVICE

1998-1999	Chairperson, Task Force on Health Status, Governor's Public Health Improvement Commission (Kansas)
1996-2000	Friends of McCain Auditorium Board of Directors
1996-1999	President, Manhattan Library Association
1993-1994	Vice-President (Membership), Manhattan Library Association
1992-1993	Chairperson, Kansas State University Garden Board
1991-1993	Co-Chairperson, Manhattan Public Library Book Sale
1992	Co-Chairperson, Kansas Master Gardener Convention

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TAB #2
• item # 2

Executive Summary

In 1997, AFR/SD developed and adopted Strategic Objective 8 (now SO20), "Adoption of Policies and Strategies for Increased Sustainability and Quality of Family Planning Services," which includes six focus areas with individual work plans and results packages (RP). The RPs are: male involvement in reproductive health, adolescent reproductive health, empowering women, integration of sexually transmitted infections in maternal child health and family planning activities, essential obstetric care, and media activities.

While reviews and revisions have taken place during the past several years, there has been no comprehensive assessment of issues and program directions since the earlier identification process. This portfolio review is an opportunity to survey the current approaches to family planning and other reproductive health services, and to situate the work supported by AFR/SD in a more integrated context than was previously the case. Specific objectives are:

- To review the influence of the RH portfolio on policies and programs
- To determine whether RH activities reflect current priority issues and approaches to RH programs in Africa in addressing current needs and reflecting state of the art in technical areas
- To recommend adjustments to the current mix of activities and funding allocations.

Resources consulted for this review include interviews, both personal and electronic, with nearly 40 USAID headquarters and Mission staff, cooperating agencies, project staff and African partners and experts; documents produced with support of AFR/SD; annotated bibliographies and conference proceedings related to the key focus areas; and summaries of the lessons learned by a predecessor project, Health and Human Resources Analysis for Africa (HHRAA), SARA I during its implementation from 1992 to 1999.

Collaboration with African Institutions
AFR/SD occupies a unique niche in USAID in its emphasis on partnering with African Institutions and networks. This has been a long-standing focus, and the portfolio underscores collaboration with African research, dissemination and advocacy institutions. Working with local institutions is time and resource-intensive, and relies on a partnership that shares reasonably balanced interests and goals.

Pop'Mediafrique
Pop'Mediafrique is a one-of-a kind project to expand and sustain media coverage of important RH issues by providing periodic forums where senior print and broadcast journalists and health professionals can be informed, and share perspectives about implications of current research. The news media's perceptions of RH issues are dramatically different today than at the outset of the project. Strategies in place among network members include: an increase in data-based news articles and radio broadcasts; improved relations and more frequent interactions between editors and health officials; and increased number of journalists assigned to report on RH issues.

Influence of AFR/SD-initiated projects
The many examples of project influence cited by respondents clustered among several categories:

- Better knowledge to influence programs
- Improved interventions
- Leveraged resources
- Innovative advocacy strategy
- Policy change
- Scaling up and regional replication
- Institutional development and networking.

Projects had effects at different levels, as reported by the respondents surveyed. Impact may be noted at the country or regional level, as well as among partner institutions and host country governments.

Influence of AFR/SD-initiated projects on Mission program decisions
USAID Missions were asked whether activities undertaken with AFR/SD support influenced programming decisions within the Mission, or at the country level. Generally, the response to this question was mixed, in part because the Missions often don't recognize that work is AFR/SD-initiated. While two Missions did not think these activities had much influence, other respondents did cite beneficial developments.

Should AFR/SD replace portfolio program areas with new activities?
Cooperating agencies were asked if they thought any programs could be eliminated from the AFR/SD portfolio, presumably to free resources for others. One CA respondent wrote that "The needs are always more than the resources. AFR/SD funding allows experimentation with innovative ideas, identification of best practices and replication. Other donors can scale up the effort. AFR/SD should access more funds to add new ideas." Few of the respondents suggested dropping any program efforts from the AFR/SD portfolio. Indeed, several pointed out the unique contribution made by the AFR/SD support, in funding areas not typically supported by field missions.

Technical support needed
Suggestions of the types of technical support that AFR/SD might provide fall into two categories: those that apply to the FP/RH sector in its entirety, and those that are targeted to particular programs within the sector. While both are consistent with activities undertaken during the past decade, it is clear that respondents see a useful role for AFR/SD in supporting the fundamental elements of program planning and development.

RH or FP issues of immediate importance
The RH and FP issues identified by Missions and CAs echo the priorities established by AFR/SD in its current activities, and those about to be given more prominence in its portfolio. In particular, mention is made of the ongoing need to address youth, to continue efforts to strengthen RH and FP programs and improve quality of care, to better

understand and promote behavior change, to empower women and socialize men to foster more equitable gender relations, and to pay more attention to community participation.

Recommendations for Moving Forward

This review of literature and in-depth interviews has shown that the results packages developed by AFR/SD are consistent with the current demands of the field in reproductive health and family planning in Africa. AFR/SD has shown that with limited resources, particularly backstop personnel, it has the capacity to identify and support innovative research, analysis and dissemination activities in key program areas.

While many respondents cited good communication and collegial relations with AFR/SD SO 20 staff and the SARA team, several underscored the need to continually devote attention to maintaining open communication, particularly with USAID Mission staff. It was clear from the mission responses that many people are unfamiliar with activities of AFR/SD, and some question the justification of this unit with its separate resources, rather than channeling support directly to the Missions.

Recommendation 1: Maintain the current results packages with strategic allocation of resources to newly emerging issues.

The current set of results packages should be maintained during the next several years. However, the results packages should be reviewed and compared with the emerging issues identified in section 2, and resources reallocated to strategically address those that are innovative, and most likely to have a wide impact once tested and proven effective.

Recommendation 2: Review key strategies derived from the literature review for program guidance.

In addition to the suggestions of key informants, the literature review highlights other strategies of importance to AFR/SD. The strategies summarized should be reviewed and compared with current program priorities, and used in updating the activities carried out to fulfill each results package.

Recommendation 3: Support innovative pilot projects with potential for replication.

AFR/SD's emphasis on innovative experimentation should be continued. It should be strengthened through a greater allocation of resources for the dissemination and promotion of findings for projects that have demonstrated success and great potential for replication or expansion.

Recommendation 4: Broaden the dissemination channels for SOTA tools and project lessons learned, and increase the visibility of AFR/SD as the sponsoring agency.

More effort must be made to reach program professionals and policy makers. While there will only be an increased demand for access to such tools electronically through the Internet using list serves and web sites, there will continue to be a need to distribute hard copies of tools and models.

Recommendation 5: Leverage resources with Global Bureau Cooperating Agencies.
The strategy of providing support to Global Bureau Cooperating Agencies should continue. It is important that AFR/SD remain current with the program focus of key CAs working in Africa, and that it is aware of areas of interest that might be developed beyond those specified in cooperative agreements.

Recommendation 6: Continue capacity building and strengthening of African networks and institutions, a unique niche for AFR/SD.
While there continues to be a need for capacity building among partner institutions, there is demonstrable evidence of a strong and growing commitment to promoting reproductive health issues among policy makers and health care professionals. The institutions will continue to benefit from technical and financial support as they assume increasingly visible roles as advocates for improved reproductive health in the region.

SO20 Portfolio Review

U.S.A.I.D.
Bureau for Africa
Office of Sustainable Development

Purpose of Review

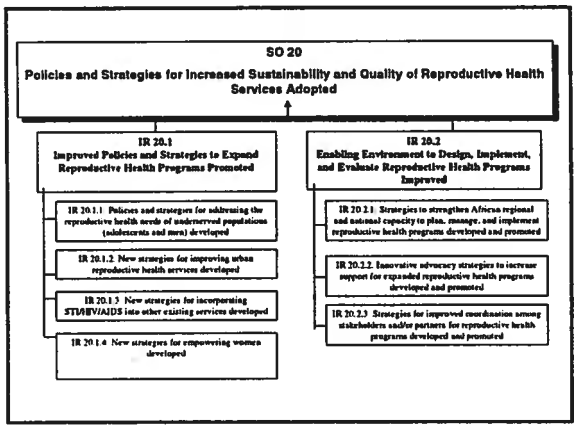
- To survey current approaches to family planning and other RH services
- To situate work supported by AFR/SD in a comprehensive context
- To present recommendations for future directions

Assessment Methodology

- In-depth interviews with key informants
- Electronic interviews with USAID Missions (8), Cooperating Agencies (11), African Institutions (3)
- Document review
- Literature review

Strategic Objectives and Intermediate Results

- SO20: Adoption of policies and strategies for increased sustainability and quality of family planning services.
- IR20.1: Improved policies and strategies to expand FP programs are developed.
- IR20.2: Enabling environment to design, implement and evaluate FP programs is improved.


SO 20
Policies and Strategies for Increased Sustainability and Quality of Reproductive Health Services Adopted
IR 20.1
Improved Policies and Strategies to Expand Reproductive Health Programs Promoted
IR 20.1.1 Policies and strategies for addressing the reproductive health needs of underserved populations (adolescents and men) developed
IR 20.1.2 New strategies for improving urban reproductive health services developed
IR 20.1.3 New strategies for incorporating STI/HIV/AIDS into other existing services developed
IR 20.1.4 New strategies for empowering women developed
IR 20.2
Enabling Environment to Design, Implement, and Evaluate Reproductive Health Programs Improved
IR 20.2.1 Strategies to strengthen African regional and national capacity to plan, manage, and implement reproductive health programs developed and promoted
IR 20.2.2 Innovative advocacy strategies to increase support for expanded reproductive health programs developed and promoted
IR 20.2.3 Strategies for improved coordination among stakeholders and/or partners for reproductive health programs developed and promoted

Results Packages

- Adolescent reproductive health
- Male involvement
- Urban family planning
- Empowering women
- Integrated STI/MCH
- Media activities
- Regional Logistic Initiative
- Essential obstetric care (SO19)

Key Issues

- Unwanted pregnancy, disease among YA
- Low male involvement in FP/RH
- Lack of services for STIs/HIV/AIDS
- Unmet need for urban FP services
- Limited decision making of women in RH
- Regional Logistics Initiative

Areas of support: SO20

- Research & analysis
- Testing innovative service models
- Documentation & dissemination
- Capacity building & institutional development
- Coalition building among partners
- Advocacy
- Policy change

Insert inverted triangle here

Outcomes of RP Activities

- Better knowledge to influence programs
- Improved interventions
- Leveraged resources
- Innovative advocacy strategies
- Policy change
- Scaling up & regional replication
- Capacity building

Outcomes of RP activities

	ARH	MEN	URB	WOM	STI	CS	Media	PAC
Know	X		X	X	X	X		X
Inter	X	X	X	X	X		X	X
Lever	X	X	X	X	X	X		
Advo	X	X	X	X			X	
Policy	X			X	X	X		X
Scale	X	X	X	X	X	X	X	X

Better knowledge through R&A to influence programs

- Dissemination of "PAC in East and Southern Africa: What Can You Do?"
- Greater knowledge of PPT for STI treatment for males
- Information on feasibility, effectiveness and cost of integration
- Improved KAP on ARH in West Africa
- Policy issues in FP financing

Improved interventions

- Improved HIV/AIDS IEC and promotion activities for youth
- Increased understanding of clinic features for male clients
- Promotion of dual method use and increased condom distribution
- Expanded PAC through nurse midwives

Leveraged resources

- Increased funds for logistics management
- Gates Foundation funds for ARSH
- Private sector support of enter-education events
- Projects secured funding from other foundations, donors (DfID, GTZ, WHO)

Innovative Advocacy Strategy

- Pop'Mediafrique supports unique network of journalists and editors
- CUP activities reach men through sports, are highly visible and recognized
- Theatre used for PAC advocacy

Policy Change

- Introduction of PAC services by nurse midwives
- WHO revision of syndromic management guidelines based on OR
- Collaborated with G/HPN & PPC to develop first Agency policy on FGC
- MOH of Mali directive discouraging health personnel from performing FGC
- Regional partnership to develop supportive policies in ARH (Uganda, Kenya and Tanzania)

Scaling Up and Regional Replication

- Urban FP services replicated in Senegal
- New country journalist RH networks established in Mali and Burkina Faso
- Kenya and Uganda scaling up PAC services through nurse midwives
- Zimbabwe Integration training module used by WHO in other countries
- Replication of PAC initiative in West Africa

Forging Links with African Institutions

- CAFS
- CEFOREP
- CERPOD
- CRHCS
- RESAR
- RCQHC
- SAGO

- Advocacy
- Agenda Development
- Research
- Analysis
- Dissemination
- Networking

Continued Support for Existing Activities

- Advocacy and policy efforts to support visibility and acceptability of PAC
- OR to address gaps about integrated approaches in STI/HIV/AIDS
- Interventions to address FGC (dearth of funding partners)
- Contraceptive logistics management

Technical Support: RPs

- EOC costing and financing
- Safe motherhood, PAC
- ARH strategies, lessons learned
- Scale up youth friendly services
- AIDS advocacy linked with commodity supply
- Bridge research on men with program interventions
- Increase access to RLM support

Suggested Infrastructure Technical Support

- Policy conferences
- Strategy development
- Capacity building in BCC, IEC, MAQ, STI management
- Organization & leadership development
- Coordination
- Evaluation
- Material design
- OR for innovative models
- Information on USAID policy, program priorities

Additional Support Needed

- Financial support for pilot interventions
- Multisectoral BCC strategies
- Produce regional materials
- Support regional TA and study tours
- Foster networking
- Donor collaboration
- Disseminate best practices
- Support regional coordination meetings
- Document successful programs

Emerging RH/FP Issues

- Issues underscore appropriateness of current portfolio
- Complement G/Pop visioning: FP as core, with strategic links to RH interventions (HIV/AIDS, STI, PAC, YARH, MCH/PHC)
- Similar issues suggested by all informants

Emerging RH/FP Issues

- Family Planning
- HIV/AIDS
- Quality of Care, Safe Motherhood
- Male participation, sexuality, violence
- Financing, management, research, communication, advocacy

Family Planning

- Policies to support ARH
- Dual method promotion
- Role of private sector
- Re-introduction of IUD

HIV/AIDS

- Integration for STI and HIV/AIDS prevention and care
- Mother to Child Transmission
- Orphans and the girl child
- Diversion of resources from RH and FP
- Inclusion of FP as part of VCT
- ARH, emphasizing HIV/AIDS

Quality of Care, Safe Motherhood

- Performance improvement and client-provider interactions
- Timely obstetrical care & costing
- Limit difficult & dangerous pregnancies
- Post abortion care
- Comprehensive FP, SM, STI programs

Male Participation, Sexuality, Violence

- Low male participation, status of women
- Impact of violence and coercion on RH
- Perceptions of gendered sexuality, sexual behavior and changes throughout the life cycle

Finance and Management

- Improved utilization, incentives and financial management
- Increase number and scope of regional initiatives
- Decentralized capacity building
- Partnerships with private sector
- Research, communication, advocacy

Expanding Applications of Models and Tools

- Training curricula
- Computer models
- Assessment tools
- Technical guidelines

Training curricula

- Training curriculum for PAC advocacy and lessons learned
- Training modules in integrated RH
- Training modules in adolescent RH
- Training curriculum for CHWs to teach families to provide home-based care
- Men's reproductive health curriculum

Computer Models

- Spectrum Suite of Models (FP model)
- Distribution Resource Planning for contraceptive commodities
- PIPELINE to track donor shipments, government commodity purchases
- Supply Chain Manager: combines DRP and PIPELINE
- REDUCE Model of maternal mortality and morbidity

Assessment Tools

- Needs Assessment Form to track national youth HIV/AIDS information
- Situation assessment of PAC programming
- Checklist to rule out pregnancy for non-menstruating women
- Costing tool to cost service packages
- Theatre for Community Action

Technical Guidelines

- *Integrating STD/HIV/AIDS services with MCH/FP programs: A guide for policy makers*
- Technical guidance on HIV transmission through breastfeeding

Effective Communication Channels

- E-mail, web pages, list serves
- Conferences
- Workshops
- Study tours

Reaching USAID Missions

- Keep it "Short and sweet"
- E-mail, web pages, hyper links
- Telephone calls
- Short summary notes
- Conference participation

Mission Support Sought from AFR/SD

- Money and TA
- Supply information and backstop support
- Alert missions to funds available to complement bilateral efforts
- Facilitate leveraging support with USAID/W and other donors

Moving Forward

- Maintain current RPs with strategic allocation of resources to emerging issues
- Review key strategies derived from literature review for program guidance
- Support innovative pilot programs with potential for replication

Moving Forward (2)

- Broaden dissemination channels for SOTA tools, project lessons learned
- Leverage resources with Global Bureau Cooperating Agencies
- Continue capacity building and strengthening of African networks and institutions (unique niche)